

Sheet1

Circulated By	SD	Signer	Page Num	Full address	City
Vernon Van	22	Heather Jenson	2386	4127 31ST AVE	Kenosha

AFFIDAVIT

STATE OF WISCONSIN)
) SS
Kenosha COUNTY)

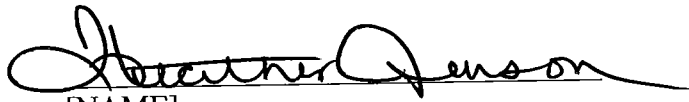
Heather Jensen, being first duly sworn on oath, deposes and states as follows:

1. I am an adult resident of the 22 State Senate District and I am a qualified elector, i.e., either registered to vote or eligible to register and vote.

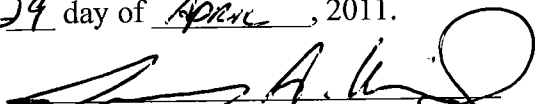
2. On 3/20/11 at 6910 Green bay Rd, I spoke with an individual who was soliciting passersby to sign a document.

4. I went out on a break and was approached by an individual asking for signatures. I asked what for and was told it was for the upcoming election. If I had known it was the recall of Senator Wirch I would not have signed it.

5. Had I not been misled about the purpose or effect of the petition, I would not have signed it. I do not and have not supported efforts to have a recall election held for Senator Wirch's seat.


[NAME]

Subscribed and sworn to before me this
29 day of April, 2011.


Notary Public, State of Wisconsin

RECALL PETITION

TO: Wisconsin Government Accountability Board

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.



THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. <u>Emilio Lebl</u>	<u>P.O. Box 1175</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<u>3/22/11</u>
2. <u>Jalays Flowers</u>	<u>Kenosha WI 53141</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3/24/11</u>
3. <u>Dallas Burton</u>	<u>4722 36th Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3/27/11</u>
4. <u>Michael J. Nelson</u>	<u>9002 Sheridan Rd Lot #22</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
5. <u>Ludwig Nason</u>	<u>Kenosha WI 53143</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
6. <u>Shelly Peral</u>	<u>5517 23rd Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
7. <u>Shawn Piccolo</u>	<u>Kenosha WI 53143</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
8. <u>Heather Johnson</u>	<u>705 316th Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
9. <u>Heather Johnson</u>	<u>Salem WI 53168</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
10. <u>Heather Johnson</u>	<u>4127 31 Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>3-22-11</u>
	<u>Kenosha WI 53141</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
		<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
		<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	

Certification of Circulator

I, Vernon Van, certify:

I reside at 800 Victory Blvd Staten Island, NY 10301
(circulator's residence - include number, street, and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under §.12.13(3)(a), Wis. Stats.

(date)

(signature of circulator)

Please mail this form to:

Recall Wirch

P.O. Box 26 • Silver Lake, WI 53170

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GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is presented by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984

608-266-8005, <http://gab.wis.gov>, email: gab@wis.gov

www.RecallWirch.com • RecallWirch@gmail.com